DOCUMENT RESUME

ED 192 869 PS 011 539

AUTHOR Richardson, Mary Sue; Kagan, Lillian
TITLE Social Support and the Transition to Parenthood.
PUB DATE Sep 79
NOTE 18p.; Paper presented at the Annual Meeting of the American Psychological Association (87th, New York, NY, September 1-5, 1979).

EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS Change; Emotional Experience; *Family Relationship; *Human Relations; Interpersonal Relationship; Interviews; *Parents; *Peer Relationship; Questionnaires; *Social Environment; *Social Influences; Stress Variables
IDENTIFIERS *Social Networks

ABSTRACT

This exploratory study investigates social support systems available to and utilized by new parents and indicates those aspects of the systems that are most helpful to them. Forty intact couples whose first child was between the ages of 3 and 7 months constituted the final sample of this study. The mean age of mothers and fathers was 30.70 and 33.21, respectively. Data collection involved a personal interview with the mother and questionnaires for both parents. Interviews were focused on five relationships in the mothers' lives: those with old friends, other new mothers, her own parents, her husband's parents and her husband. Questionnaires provided demographic, social system and support functions data, as well as information on the degree of satisfaction with and change desired in social networks. Additional questions provided information concerning positive affect, anxiety, depression, somatic complaints, and feelings of inadequacy. In all but one case, preliminary results indicated that new parent's lives are better (in terms of greater network satisfaction, higher levels of positive affect and less symptomatology, higher self-rated role performance, and satisfaction) when networks are larger, offer more sources of support, include more individuals in the relationship categories and, for mothers, when their network change scores are positive. (Author/RH)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

U S DEPARTMENT OF HEALTH, EDUCATION & WELFARE
NATIONAL INSTITUTE OF EDUCATION

THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL NATIONAL INSTITUTE OF EDUCATION POSITION OR POLICY

ED192869

Social Support and the Transition to Parenthood

Mary Sue Richardson
Lillian Kagan

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY

Mary Sue Richardson

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

PS011539

Paper presented at APA, 1979

The transition to parenthood which occurs with the birth of a first child has been identified as one of many stressful life events (Holmes & Rahe, 1967) with diverse studies investigating the degree of stress associated with the onset of parenting (Dyer, 1963; Le Masters, 1957; Rossi, 1968). Stress research has established a linkage between exposure to stress and subsequent adaptation, and has focussed on development of models for identifying those factors which moderate reactions to stress. One such factor included in numerous models (Antonovsky, 1974; Caplan, 1974; Mechanic, 1974[a] and 1975[b]; Zill, Note 8) is availablility of social support in a stress period. The current study was designed to examine social support systems in the transition to parenthood.

Social support can be defined as the availability of stable and continuing interactions with helpful others. According to Caplan (1976) support systems function to assist the individual experiencing stress to mobilize his or her resources, to help with tasks, and to provide tangible resources such as skills, money, information, and guidance. Studies supportive of the theoretical connection between stress and adaptation have been conducted with numerous samples including pregnant women (Brown, Note 1), middle-aged men and women (Lowenthal & Weiss, 1976), and among those suffering recent job loss (Gore, 1978). In fact, the popularity of social support as a critical coping resource is attested to by the spate of recent papers describing methods and procedures useful to mental health practitioners interested in mobilizing the indigenous resources of client populations (e.g., Collins & Pancoast, 1976; Lentz, 1976; Curry & Young, Note 2; Danish, Note 3).

Despite these general and encouraging results regarding social support, Heller's (in press) critical review of the literature notes that in order to know when ties to others will have a beneficial impact, we need basic information about specific aspects of support systems and how they function to alleviate stress. Moreover, it is reasonable to assume that stressful life events may differ in the kinds of support most likely to be helpful. Given the current popularity of diverse programs for new and expectant parents, many of which aim to provide social support, it is critical to have a more precise understanding of support system variables in relation to this life event.

Two approaches to the study of social support systems for new parents were

formulated. The first draws on network theory (Bott, 1971; Craven & Wellman, 1973; Mitchell, 1969; Sarason, Carroll, Maton, Cohen & Lorentz, 1977). The concept of a social network takes into account the interrelatedness of the social system components and provides a way to consider the kind of support an individual receives as well as certain structural properties of the network which may affect ability to tolerate stress. Persons included in a network are all those with whom the central figure has contact and who are regarded as actual or potential sources of support.

A number of studies have utilized network concepts to study social support as mediators of stress. In general, qualitative and structural network characteristics appear to be more significant than quantitative aspects such as size or frequency of contact (Tolsdorf, 1976; Liem, Note 4). Qualitative characteristics considered include type of support rendered (e.g., emotional, socializing, cognitive guidance, material supports) and source of support (whether from family, friends, etc.). Hirsch's (in press-a; in press-b) studies further indicate that networks characterized by low density (where individuals in a network are less likely to know one another) and more multiplex or multidimensional relationships (where individuals in the network tend to have more than one kind of relationship with the central figure) function better as buffers of stress. Thus, a number of features of new parents' (both mothers and fathers) support systems, were examined in this study.

The second approach takes into consideration the problem with categorical typing of any particular relationship as supportive as delineated by Liem and Liem (Note 5). Common sense tells us that relationships change over time, offer different resources at different times, and may be a source of stress as well as support. In fact, there is a reciprocal and dynamic relationship between support and stress which militates against categorizing any relationship as only supportive over time and demands a more process-oriented study of social support systems. While not negating the utility of network concepts for elucidating those aspects of a support system which affect provision of support, understanding the dynamics of support requires a more detailed investigation of the potentially shifting character of support and stress within relationships. In order to study this dimension, five sets of relationships for new mothers only were examined. These are: old friends, other new mothers, the mother's family, her husband's family, and husbands.

This study of social support systems for new parents is exploratory in nature. Our aim is to provide a picture of the social support systems available to and utilized by new parents and to suggest those aspects of the systems most helpful to new parents. The sample for the study was selected to include those parents whose first child was between three and seven months in age. These limits were set in order to avoid the chaos and upheaval of the first month's of the child's life and to assess patterns of support and adaptation as they were emerging. Quality of adaptation was assessed by a battery of measures of psychological functioning.

METHOD

Sample and Data Collection Procedures

The final sample of the study was comprised of 40 intact couples whose first

child was between the ages of 3 and 7 months. Sample selection drew upon a number of sources. These included private obstetrician and pediatrician referrals, several classes for new mothers, a maternity program affiliated with local hospitals, and referrals from personal acquaintances and new mothers in the sample. In each case, the mother was contacted to request her and her husband's participation in the study. Almost all of those contacted agreed to participate.

The mean age of mothers in the sample was 30.70, with mean age of fathers, 33.21. Average age of the child was 4.97 months. On the average, the couples had been married for 4.52 years. Most of the sample had completed a college degree. All of the fathers were employed although some did not work full-time. Employment data for women indicate that 15 were employed at the time the interview with a mean of 7.43 hours of work per week.

Data collection involved a personal interview with the mother, approximately 45 minutes to one hour in length. Following the interview, questionnaires were left for both the mother and father to complete and return by mail. Participants in the study were requested to complete the questionnaires separately from their spouses. Of all those interviewed, only three couples did not return their questionnaires. The interviews with these mothers were dropped from the sample. In one case, a father refused to participate. Since the data for the mother was complete, she was included in the sample. Thus, of our 40 intact couples, complete responses are available for 40 mothers and 39 fathers.

Instruments

Interview: Several pilot groups of mothers were interviewed in order to develop the interview format for the study. First interviews were relatively unstructured with increasing structure built into subsequent interviews following analysis of pilot data. Since our major concern was to examine what had happened in the significant relationships in these women's lives, the final semi-structured interview format was divided according to five sets of relationships: (1) old friends, defined as those the mother would consider to be good friends and with whom there was relatively frequent contact prior to the baby's birth; (2) other new mothers, defined as other mothers who had babies or small children; (3) mother's family; (4) her husband's family, and (5) husband. Questions were asked about the changes that had taken place in these relationships, reactions to changes, kinds of support received, and kinds of problems encountered. Additional questions were posed to inquire about overall changes in the importance of relationship for these mothers.

Interviews were conducted in the participants' homes with few exceptions. Following preliminary discussion of the purpose of the study designed to orient the mothers to the kinds of data we were looking for and to develop a level of trust and rapport, the interview questions were posed with responses recorded by interviewer.

Rating scales used to code interview data were developed on the last set of pilot interviews and further revised on the first set of ten interviews.

Development and use of rating scales followed the guidelines outlined in the Fels longitudinal studies (Champney, 1941) and in the development of the Social Role Adjustment Interview (Cohler, 1975). Ratings for degree of support and degree of stress were obtained for all five sets of relationships. Quality of change ratings, defined as direction and intensity of change, were obtained for all but other new mothers (i.e., old friends [OF], mother's family [MF], her husband's family [HF], and her husband [H]). For other new mothers, data were coded for presence of a new mother network, expressed need to meet other new mothers, and knowledge of resources for making such contacts. For the purpose of this paper, only data on quality of change from the interview will be reported.

The quality of change scale incorporated the direction of change, whether positive or negative, the intensity of the change, and reactions to these changes. The scale ranged from +3 to -3 with a +3 rating indicative of highly positive change and highly positive reaction to this change. A -3 rating indicated highly negative change and active feelings of distress. The midpoint of the scale represented an equal balance of positive and negative change or no change at all. In the case of the husband, ratings were based on a single individual. For other relationships, ratings were based on the overall set or relationships within a particular category. For example, instances where change was positive in some relationships within a category and negative in other relationships resulted in a scores somewhere between +3 and -3 depending upon the balance of change and affect. Additionally, ratings were based on the current status of these relationships. In cases where early problems had been resolved by the time of the interview, these problems were not considered in the quality of change rating.

Although interrater reliability for the degree of change scale based on the first 20 interviews was close to .70, all interviews were coded by each of the two interviewers and each discrepancy in ratings discussed. This procedure was followed to insure greater accuracy of results.

Questionnaire: The questionnaires for mothers and fathers were identical. The first set of questions assessed basic demographic information and selected questions on the experience of early parenthood. The second section included the instruments used to measure the social system variables. These instruments were based on those used by Hirsch (in press-a, in press-b) and Liem (Note 4). Parents were first asked to list those individuals who are important or significant persons in their lives, provided encouragement or support, or are frequently seen for visits and socializing. Using this list, which was limited to 15 names, parents completed a matrix indicating the extent to which persons in the network list also were friends with one another. They also indicated the type of relationship they had with each person on the list and the kind of support they received from each person. Relationship categories were family member (RCF), work associate (RCW), friend (RCFR), and parent of one or more small children (RCP). Support functions assessed were general socializing (SFS), emotional support and encouragement (SFE), and cognitive guidance (SFCG), i.e., useful advice and information. Any one person on the list might be characterized by one or more relationship categories and might provide one or more support functions. These data were scores for size of network (SNSize), density (where X=number of x's in the matrix and N=number of people listed, density=X/N), total

number providing each kind of support and total number included in each relationship category. Finally, parents were asked to rate their degree of satisfaction with and the amount of change desired in their social networks on two five point scales.

In the third section of the questionnaire a broad range of psychological functioning was assessed. Two general measures of psychological functioning included were (1) a 10-item semantic differential scale which assessed level of positive affect (Campbell, Converse, & Rodgers, 1976) and a 40-item psychological symptom scale which tapped symptoms of anxiety, depression, somatic complaints, and feelings of inadequacy (Kellner & Sheffield, 1973). Specific measures of psychological functioning included brief, self-report performance and satisfaction scales for each of three roles, marriage, parenthood, and work. These scales were developed by Richardson & Alpert (Note 6), based on the role scales of Psychiatric Epidemiology Research Interview (Note 7). Only employed parents completed the work performance and satisfaction scales.

RESULTS

Descriptive data for each of the variables in the study are presented separately by sex in Table 1 and results of t-tests for sex differences on these variables are reported. The only significant sex difference found indicates that fathers reported more work associates than mothers.

Preliminary data analysis completed to date has focussed on examination of the Pearson product-moment correlations between the social support variables and outcome variables for each sex. For purposes of presentation these outcome variables are categorized into three groups: (1) general satisfaction with social support network as measured by network satisfaction and degree of change desired in the network, (2) general psychological functioning as measured by level of positive affect and psychological symptomatology, and (3) role-related psychological functioning as measured by role performance and satisfaction in each of the marital, parent, and work roles. Results are reported in Tables, 2, 3, and 4.

At this point, pending procedures to combine outcome indices within each set and involving more refined regression analyses, it is most appropriate to concentrate on a few general results. First, data indicate at least one significant relation between all but one of the social support variables and one or more of the outcome measures, though patterns vary by sex and by outcome considered. The single social support variable with no significant relation to outcome was the change score for mother's family.

In all but one case, results indicate that outcome is better (greater network satisfaction, higher levels of positive affect and less symptomatology, higher self-rated role performance and satisfaction) when networks are larger, offer more sources of all three kinds of support considered, include more individuals in each of the relationship categories and, for mothers, when change scores are positive. The single exception concerns density. For mothers, denser networks are associated with greater network satisfaction. Results for fathers indicate that general psychological functioning is impaired in the presence of denser networks.

With respect to variations by sex, for mothers, relations between social support variables and outcome measures were obtained across all three sets of outcomes. While no specific social support variable stands out as most significant across the board, quality of change scores, particularly for the husband and his family, appear to be, if anything, more highly associated with outcome than the other social support variables.

For fathers, variations in social support were more closely associated with measures of role-related psychological functioning than with either general network satisfaction indices or general psychological functioning.

For both sexes the number of friends in the network appeared to be more highly associated with outcome than number of individuals in other relationship categores.

DISCUSSION

Examination of descriptive data for social support measures indicates a sample of parents for whom friends constitute the largest number in their social networks and for whom network contacts provide more socializing experiences than emotional support or cognitive guidance. Despite the moderate degree of satisfaction expressed by these parents, their responses on the average indicate some desire for change in these networks. Surprisingly, sex differences between mothers and fathers were minimal. That fathers included more work associates in their networks than mothers is expected in view of their differing life styles. In general, the picture of the social networks of these parents conforms to what might be expected of a well-educated sample of parents, older than the average, who are most likely to have established a network of friends and engage in a shared social life.

This relatively static picture, however, takes on a great deal more substance when the interview data for the mothers is examined. Quality of change ratings indicate an average change in a negative direction for old friends and for husbands, with positive change for the mothers' and fathers' family.

Examination of the content of responses for old friends reveals a dynamic and, in some cases, turbulent picture of the impact of parenthood on old ties. In some cases, parenting was accompanied by increased contact and greater closeness with old friends, particularly when old friends also were parents.

In other cases, our mothers reported a gradual and non-descriptive alienation from old ties. These women, though they might express some sadness or regret, seemed ready and able to adjust to the shifts in their relationships with old friends.

A number of mothers experienced severe disruption and distance from old friends or threat of such change and were or had been actively distressed at these changes. Most striking in these women was the variation in their responses to the negative change. At the time of the interview, some continued to feel upset, resentful, and angry at the loss of friendship. Others engaged in minor or major attempts to restore ties such as phone calls, visits, invitations, etc.

What is apparent in these patterns is the mixture of circumstances, cognitive appraisal, and coping responses related to the quality of change with old friends. For those whose circle of friends were parents themselves or interested in parenting, the natural and temporary preoccupation with a new child facilitated a reintegration of the friendship including self as parent. Responses to experienced distance from old friends, most likely not parents themselves, ranged from anger, an almost philosophical acceptance and detachment from old ties, to active attempts to maintain or repair ties with old friends.

Inspection of responses regarding change in relationships with husbands reveals a similarly mixed picture. Although almost all mothers reported changes such as decreased time together, disruption of routines, fatigue due to loss of sleep, and curtailment of activities, the overall patterns of change differed radically. Positive change was, most frequently, characterized by those women for whom having a baby represented a shared life goal with their husbands. These relationships were such that they seemed easily to absorb the stresses engendered by parenthood.

Negative change with husbands was reported by many mothers although, again, for some, it was ameliorated by positive change. In those instances when the husband did not provide the needed support, and where the problem-solving resources in the marriage were lacking, emotional ties became intensely strained. In a number of instances, problems experienced by the husband in his work role, e.g., job loss, job change or instability, exacerbated or added to tensions in the marriage.

The extent to which the marital relationship suffered from the strain of parenthood seemed to depend on the quality of the pre-existing relationship and the resources available to the couple to cope with strain. Most frequently mentioned by mothers as an important resource was the ability to openly discuss the problems in and process of the relationship. This open communication system served to keep tensions within manageable bounds, and even in the presence of a high level of current tension , augered well for eventual return to a more satisfying relationship. A few mothers reported that they had sought or were in the process of seeking professional help with their marriages. Others seemed to expect the marital relationship to improve with time, while a few who were experiencing a high level of conflict, indicated pessimism regarding the eventual survival of their marriage.

In sum, while almost without exception husbands were cited as being one of those most helpful to the mother, the relationship in general offered a great deal of stress in addition to support.

Change with the families of mothers and fathers was typically more positive. Many reported being closer to their own families and to those of their spouses. The onset of parenting seemed to provide an opportunity for a rekindling of the original familial relationships with decreased emphasis on and greater ability to tolerate problems which had existed or were occuring in these relationships. Many expressed the feeling that the presence of a child made their own familial relationships more important to them and that the families typical attention to the child was a source of satisfaction. It may be that our sample of relatively older new parents had had sufficient time to establish themselves as adults in

the world and to lead relatively non-family-centered lives. Thus, for the most part, they were able to enjoy a greater closeness with their families and to cope with problems encountered with greater ease.

In general, our quality of change data for new mothers describe a complex set of modifications in pre-existing relationships. Clearly, the degree of relationship change required upon entering a new social role, such as parenting, argues against conceptualizing support systems for new parents in static or non-dynamic terms. In fact, the term "support system" itself does not adequately capture the reality of these social networks.

With respect to the results of preliminary analyses examining relationships between social support and outcome variables, several general observations can be made. First, a comparision between patterns of relations for the set of mothers' quality of change variables and the support variables assessed by questionnaires is at least as important in relation to outcome as the more traditional measures of social support. These results support our contention that social relationships during a stressful life period may operate as independent sources of stress as well as buffers of stress. Models of stress and adaptation need to be refined to take this into account.

Second, the problem of the competing hypothesis of social competence needs to be considered with respect to social support networks (Heller, in press). Heller points out that correlational data connecting social support networks and adaptation indices can be as easily explained by the social competence of the central figures as by supposed beneficial effects of supportive relationships as bufferes of stress. Clearly, this research study suffers from the same methodological flaw. We have no valid way of determining the social competence of the parents in our sample. However, our informal examination of interview content for mothers supports the importance of social competence and broadens it. Socially competent individuals may not only be able to tolerate stress more readily and be more proficient in establishing important supportive relationships, they also may have the skills to cope with potentially desruptive changes in basic relationships precipitated by a major life change. Nevertheless, a conceptualization of social competence as a competing hypotheses does not seem to be warranted. Rather, our data suggest that social competence be considered as an important person variable in addition to the current conceptualization of support systems as an environmental resource.

Sex differences in patterns of relations between social support and outcome merit attention. First, it is clear that a range of measures assessing psychological functioning should be included in studies of social support. The more pervasive associations between social support variables and outcome measures for mothers than for fathers suggests that mothers' social relationships are both more important and more salient to them.

Until additional analyses are completed, it is difficult to make any statement regarding those aspects of social support systems which are most important to new parents. A comment regarding density, however, is warranted. Although Hirsch's studies (in press-a; in press-b) indicate that low density networks

were more satisfying and adaptive, our data suggest that this is true for our fathers but not for mothers. Perhaps the denser network unit with multiple relationships among its members is easier to relate to for a mother typically preoccupied with her new baby and role, and, thus, does not have the adverse consequences identified for fathers. An alternate explanation is that women's level of skill in managing complex social relationships is greater than men's. Consequently, they are able to cope with interpersonal problems in a dense network more competently than men.

REFERENCES

Antonovsky, A. Conceptual and methodological problems in the study of resistance resources and and stressful life events. In B.S. Dohrenwend & B.C. Dohrenwend (Eds.), Stressful life events: Their nature and effects. New York: John Wiley & Sons, 1974.

Bott, E. Family and social networks. New York: The Free Press, 1971.

Caplan, G. Support systems and community mental health. New York: Behavioral Publications, 1974.

Caplan, G. The family as a support system. In G. Caplan and M. Killilea, M. (Eds.) Support Systems and mutual help: Multidisciplinary explorations. New York: Grune & Stratton, 1976.

Campbell, A., Converse, P.E., & Rodgers, W.L. The quality of American life: Perceptions, evaluations, and satisfactions. New York: Russell Sage, 1976.

Champney, H. The measurement of parent behavior. Child Developement, 1941, 12, 131-166.

Cohler, B.J. Social adjustment and psychopathology among formerly hospitalized and non-hopsitalized mothers. I. Development of the social role adjustment interview. Journal of Psychiatric Research, 1975, 12, 1-18.

Collins, A. & Pancoast, D. Natural helping networks. Washington, D.C.: National Association of Social Workers, 1976.

Craven, E.L. Social and community intervention. Annual Review of Psychology, 1973, 24, 423-472.

Dyer, E.D. Parenthood as crisis: A re-study. Marriage & Family Living, 1963, 25, 196-201.

Gore, S. The effect of social support in modulating the health consequences of unemployment. Journal of Health and Social Behavior, 1978, in press.

Heller, K. The effects of social support: Prevention and treatment implications. In A.P. Goldstein, & F.H. Kanfer (Eds.) Maximizing treatment gains: Transfer enhancement in psychotherapy. New York: Academic Press, in press.

Hirsch, B.J. Natural support systems and coping with major life changes. American Journal of Community Psychology, in press (a).

Hirsch, B.J. Psychological dimensions of social networks: A multimethod analysis. American Journal of Community Psychology, in press (b).

Holmes, R.L. & Rahe, R.M. The social readjustment scale. Journal of Psychosomatic Research, 1967, 11, 213-228.

Kellner, R. & Sheffield, B.F. A self-rating scale of distress. Psychological Medicine, 1973, 3, 88-100.

LeMasters, E.E. Parenthood as crisis. Journal of Marriage and Family Living, 1957, 19, 352-355.

Lentz, W.N. The informal community caregiver: A link between the health care system and local residents. American Journal of Orthopsychiatry, 1976, 46, 678-688.

Lowenthal, M.F. & Weiss, L. Intimacy and crises in adulthood. The Counseling Psychologist, 1976, 6, 10-15.

Mechanic, D. Discussion of research programs on relations between stressful life events and episodes of physical illness. In B.S. Dohrenwend & B.P. Dohrenwend (Eds.) Stressful life events: Their nature and effects. New York: Basic Books, 1974. (a)

Mechanic, D. Social structure and personal adaptation: Some neglected dimensions. In G.V. Coelho, D.A. Hamburg, & J.E. Adams (Eds.) Coping and adaptation. New York: Basic Books, 1974. (b)

Mitchell, J.C. The concept and use of social networks. In J.C. Mitchell (Ed.) Social networks in urban situations: Analyses of personal relationships in Central African Towns. Manchester, England: Manchester University Press, 1969.

Rossi, A. Transition to parenthood. Journal of Marriage and the Family, 1968, 30, 26-39.

Sarason, S.B., Carroll, C., Maton, K., Cohen, S., & Lorentz, E. Human services and resource networks. San Francisco: Jossey-Bass, 1977.

Tolsdorf, C. Social networks, support, and coping: An exploratory study. Family Process, 1976, 15, 407-417.

REFERENCE NOTES

1. Brown, C.A. The effect of resources on life styles: Case histories. Unpublished paper, 1974.

2. Curry, R. & Young, R.D. Socially indigenous help: The community cares for itself. Paper presented at annual meeting of American Psychological Association, Toronto, September 1978.

3. Danish, S.J. Facilitating natural caregiving as a means of improving a community's quality of life. Paper presented at annual meeting of American Psychological Association, Toronto, September 1978.

4. Liem, J.H. Life events, social supports, and physical and psychological wellbeing. Paper presented at the American Psychological Association Convention, Washington, D.C., September 1976.

5. Liem, G.R., & Liem, J.H. Social support and stress: Some general issues and their application to the problem of unemployment. Paper presented at a Center for Metropolitan Studies Conference on the Economy and Mental Health, June 1978.

6. Richardson, M.S. & Alpert, J.L. Reliability and validity of three role scales. Unpublished paper. 1978.

7. Social Psychiatry Research Unit. Appendix II to the Measurement of psychopathology in the community: Problems and procedures. The Psychiatric Epidemiology Research Interview: A report in seven role scales. Unpublished memo, Columbia University, 1977.

8. Zill, W. Developing indicators of effective life management. Paper presented at the Urban Regional Information Systems Association, 1973. Washington, D.C.: Social Science Research Council, January 1974.

TABLE I

Means and Standard Deviations of Social Support and Outcome Variables

Variables	Mothers $\bar{x}$	Mothers s.d.	Fathers $\bar{x}$	Fathers s.d.
SN size	10.70	3.52	10.11	3.76
Density	.96	.73	1.15	.88
SFS	9.10	3.85	8.76	4.49
SFE	6.82	6.60	6.59	4.08
SFCG	5.70	2.70	5.86	4.28
RCF	3.53	2.39	3.89	2.70
RCW[a]	.92	1.16	1.68	2.01
RCFR	7.28	3.78	7.00	4.22
RCP	4.32	2.83	3.14	3.10
Change-OF	-.84	1.45	-	-
Change-MF	.74	1.42	-	-
Change-HF	.86	1.10	-	-
Change- H	-.30	1.87	-	-
Network Satisfaction	4.05	.90	4.11	.86
Change Desired	3.53	.96	3.68	.84
Positive Affect	52.45	7.96	55.13	9.47
Symptoms	46.78	12.32	42.72	11.48
Marital Performance	19.75	3.33	20.61	3.27
Marital Satisfaction	27.28	5.51	28.18	3.59
Parent Performance	16.10	1.87	16.29	1.94
Parent Satisfaction	33.68	4.40	33.85	4.56
Work Performance	20.62	2.47	21.93	2.67
Work Satisfaction	24.92	6.70	23.93	5.44

[a]Sex difference significant at .05 level

TABLE 2

Correlations Between Social Support Variables and Measures of General Social Network Satisfaction

	Mothers		Fathers	
Variables	Network Satisfaction	Change Desired	Network Satisfaction	Change Desired
SN size	.085	.131	.155	-.015
Density	.277*	.292*	-.106	-.237
SFS	.035	.013	.161	.039
SFE	.374**	.355*	.215	.037
SFCG	.248	.290*	.036	-.027
RCF	.130	.280*	.127	-.002
RCW	.101	.174	-.167	-.221
RCFR	.184	.108	.023	-.062
RCP	.024	-.046	.202	-.090
Change-OF	.530***	.511***	-	-
Change-MF	.173	.203	-	-
Change-HF	.335*	.276*	-	-
Change- H	.051	.045	-	-

* $p < .05$
** $p < .01$
*** $p < .001$

TABLE 3

Correlations Between Social Support Variables and Measures of General Psychological Functioning

	Females		Males	
Variables	Positive Affect	Symptoms	Positive Affect	Symptoms
SN size	.292*	.024	-.035	-.011
Density	.228	.060	-.340*	.464*
SFS	.091	.060	.096	-.190
SFE	.346*	-.051	-.029	.076
SFCG	.380**	-.015	.037	-.048
RCF	.043	.069	-.037	-.171
RCW	-.018	-.041	.129	-.018
RCFR	.294*	.013	-.083	.096
RCP	.227	-.199	.034	-.051
Change-OF	.212	-.245	-	-
Change-MF	.013	-.082	-	-
Change-HF	.299*	-.020	-	-
Change- H	.266*	-.291*	-	-

* $p < .05$

** $p < .01$

TABLE 4

Correlations Between Social Support Variables and Measures of Role-Related Psychological Functioning

	Females					
Variables	Marital Perform.	Marital Satis.	Parent Perform.	Parent Satis.	Work Perform.	Work Satis.
SN size	.324*	.192	.220	.076	-.279	.293
Density	.014	.009	-.054	-.038	.295	-.250
SFS	.228	.048	.417**	.028	-.138	.386
SFE	.241	.133	.131	.207	-.072	-.166
SFCG	.171	.190	.103	.238	.311	.199
RCF	-.232	-.089	-.070	-.125	-.150	.013
RCW	.379**	.163	.299*	.000	-.167	.114
RCFR	.581**	.363*	.298*	.069	-.362	.003
RCP	.434**	.191	.173	.128	.084	.144
Change-OF	.179	.191	-.064	.027	.360	-.225
Change-MF	.009	.038	.148	.102	.352	.011
Change-HF	.243*	.362*	.276*	.200	.342	-.063
Change- H	.573***	.532**	.144	-.026	.271	.546*

	MALES					
Variables	Marital Perform.	Marital Satis.	Parent Perform.	Parent Satis.	Work Perform.	Work Satis.
SN size	.390**	.363*	.469***	.353*	-.048	-.108
Density	-.127	.298*	.021	.077	.142	-.272
SFS	.262	.268	.382*	.360*	.001	.011
SFE	.434**	.222	.448**	.224	-.149	-.201
SFCG	.530***	.222	.400**	.244	.098	-.099
RCF	.137	.220	.320*	.146	-.046	-.149
RCW	.097	.093	.179	.172	.543***	.021
RCFR	.409**	.276*	.357*	.332*	.185	-.019
RCP	.258	.405**	.243	.366*	.071	.075

* $p < .05$
** $p < .01$
*** $p < .001$